

## **THE STATE OF CALIFORNIA 1915(b) PROGRAM**

Project Name: Intermediate Care Facilities for Persons with  
Developmental Disabilities- Continuous Nursing  
(ICF/DD-CN)  
Project Approval: August 17, 2001

### **Program Summary**

In January 2001, the State of California Department of Health Services submitted a 1915(b) application to test a new licensure for Intermediate Care Facilities for Persons with Mental Retardation (ICF/MR). Currently, the State has two levels of ICFs/MR service. The ICF/DD-H level of care is for people who require developmental training and habilitative services. The ICF/DD-N level of care is for people who require intermittent skilled nursing care, as well as developmental training and habilitative services. The new level of care, ICF/DD-CN is intended for people who require 24-hours of skilled nursing care and/or observation to allow the individual to remain in a small community-based setting. The intent of the waiver is to test the service in 10 locations before expanding it Statewide.

### **Health Care Delivery**

The State intends to pilot this program in 10 sites throughout the State. The Sites must apply and meet certain requirements in order to be eligible to provide the new level of care. At a minimum, the site must be able to provide the ICF/DD-N level of care. Since the State wishes to pilot this program in 10 locations, it will need a 1915(b)(4) waiver to restrict providers and a 1915(b)(3) to provide the additional nursing services.

### **Benefit/Service Package**

In addition to the benefits provided to beneficiaries under the State Plan for CF/DD-H level-of-care, beneficiaries in this waiver will receive 24-hours of skilled nursing care and/or observation.

### **Cost Effectiveness**

Prior to the implementation of this waiver, a beneficiary that required continuous nursing was placed in a more costly facility. This waiver allows for the establishment of a lesser-cost facility that for beneficiaries that require continuous nursing.

### **Special Features**

This waiver uses savings achieved through the use of a lower-cost facility (using the 1915(b)(3) authority) to pay for the continuous nursing services.

Contact: Chevell Thomas – 410-786-1387 – E-Mail – [CThomas3@cms.hhs.gov](mailto:CThomas3@cms.hhs.gov)

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